

Provider Inspection Summary
For the period 07/01/2003 to 06/30/2006
Adult Family Home

Facility Information

Facility Name: ASPEN ASSISTED LIVING (0009485)
Address: 343 WOOD AVENUE, NEKOOSA, WI 54457
License Status: REGULAR
Licensed/Certified/Registered 10/24/2001
Regional Office: NORTHERN REGION (RHINELANDER), (715) 365-2800

Survey History

Survey ID: 0095206 **End Date:** 07/06/2005 **Type:** STANDARD **Purpose:** SURVEY
Results: NO STATEMENT OF DEFICIENCY ISSUED

Disclaimer: This information is provided as a public service by the Wisconsin Department of Health and Family Services (DHFS). The Department neither endorses any facility nor guarantees that this information is accurate, up-to-date, or complete. This information, which should not be used as a sole source in selecting a facility, does not replace official information sources.

Provider Inspection Summary
For the period 07/01/2003 to 06/30/2006
Adult Family Home

Enforcement History

Date: 08/11/2003	SOD #10005209	Appealed: No
-------------------------	----------------------	---------------------

Sanctions

OTHER SANCTION

Disclaimer: This information is provided as a public service by the Wisconsin Department of Health and Family Services (DHFS). The Department neither endorses any facility nor guarantees that this information is accurate, up-to-date, or complete. This information, which should not be used as a sole source in selecting a facility, does not replace official information sources.